KELLEY DRYE & WARREN LLP

A LIMITED LIABILITY PARTNERSHIP

333 WEST WACKER DRIVE 26TH FLOOR CHICAGO, IL 60606

(202) 342-8400

FACSIMILE
(202) 342-8451
www.kelleydrye.com

MICHAEL DOVER

DIRECT LINE: (312) 857-7087

 ${\tt EMAIL:\ mdover@kelleydrye.com}$

February 1, 2016

Ms. Marlene H. Dortch, Secretary Federal Communications Commission 445 12th Street, S.W. Washington, D.C. 20554 via ECFS

Re: <u>Submission of FCC Form 555 for American Broadband and</u> Telecommunications Company; WC Docket No. 14-171

Dear Ms. Dortch:

NEW YORK, NY

LOS ANGELES, CA

CHICAGO, IL

STAMFORD, CT PARSIPPANY, NJ

BRUSSELS, BELGIUM

AFFILIATE OFFICES
MUMBAI, INDIA

On behalf of American Broadband and Telecommunications Company ("American Broadband" or "Company"), pursuant to 47 C.F.R. § 54.416, enclosed please find completed copies of FCC Forms 555 for all relevant Study Area Codes. American Broadband also submitted these forms to USAC and the relevant state commissions.

Please contact the undersigned at (312) 857-7087 if you have any questions or require additional information.

Respectfully submitted,

Michael Dover

Counsel to American Broadband and Telecommunications Company

Enclosure

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a	certification form for each SAC through which it provides Lifeline service).
COLORAdo	AMERICAN BROADBAND AND TELECOMMUNICATIONS
State	ETC Name
AMERICAN ASSISTANCE	
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
determined in accordance with Section 3(2) of the Communications	Yes No No Solution No
Affiliated ETC's SAC	Affiliated ETC's Name
formation, or other similar legal document. An officer laws (or partnership agreement), and would typically be	of a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate bypresident, vice president for operations, vice president for finance, iler is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	e this section
I certify that the company listed above has certification p	rocedures in place to:
	entation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household r her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon acce Lifeline administrator prior to enrolling a consumer in	ss to a state database and/or notice of eligibility from the state in the Lifeline program.
above.	horized to make this certification for the Study Area Code listed
InitialJA_	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
0	0	0	0	0

Recertification Results:

F	G	H = (F-G)	J.	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

К	L	
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC	
0	0	Ī

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA.

AND/OR

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _______

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
0	0	6

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?	Yes 🗖	No 🗆

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	O
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	O
October	6
November	Ö
December	0
Total Subscribers	0

Signature Block

	ove is in compliance with all federal Lifeline certification above. I am authorized to make this certification for the
Signed 4	JEFF ANSTED
Signature of Officer JSA 6 AMBT, NET	Printed Name and Title of Officer
Email Address of Officer	Date

Person Completing This Certification Form

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

	ertification form for each SAC through which it provides Lifeline service).
HAWAII	AMERICAN BROAdband And TELECOMMUNICATIONS
State	ETC Name
AMERICAN ASSISTANCE	
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
determined in accordance with Section 3(2) of the Communications	Yes No vising page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) mership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
formation, or other similar legal document. An officer i laws (or partnership agreement), and would typically be p	of a position listed in the article of incorporation, articles of s a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, ler is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	this section
I certify that the company listed above has certification pr	rocedures in place to:
A) Review income and program-based eligibility docume that, to the best of my knowledge, the company was income and/or program-based eligibility prior to his or	ntation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in	ss to a state database and/or notice of eligibility from the state the Lifeline program.
I am an officer of the company named above. I am authabove.	norized to make this certification for the Study Area Code listed
Initial	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
0	0	0	0	0

Recertification Results:

F	G	H = (F-G)	1	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	O	6	O

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
6	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.
Initial

AND/OR

	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:								
	(List database or name of administrator here)	. Results a							in
	Blocks K through L. I am an officer of the company named above.	I am author	rize	d to make	thi	s cer	tificat	ion for	the
	SAC listed above.								
	Initial								

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial __JA

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
0	0	0

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

¥ -	41	ETC	D D.: 19	1.7
18	tne	EIC	Pre-Paid?	

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
uly	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

19	T7	0	σ

Signature of Officer

JSA G AMBT. NET

Email Address of Officer

JERF ANSTEL

Person Completing This Certification Form

JEFF ANSTED PRESIDENT

Printed Name and Title of Officer

1/28/1

Date 419-824-

Contact Phone Number

1

349031

Study Area Code (SAC)

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

IL	American Broadband and Telecommunications (
State	ETC Name		
American Assistance	AMERICAN BROADBAND AND TELECOMMUI		
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)		
Does the reporting company have affiliated ETCs?	Yes No O		
determined in accordance with Section 3(2) of the Communication	C, using page 4 and additional sheets if necessary. Affiliation shall be ns Act. That Section defines "affiliate" as "a person that (directly or indirectly) ownership or control with, another person." 47 U.S.C. § 153(2). See also 47		
Affiliated ETC's SAC	Affiliated ETC's Name		
formation, or other similar legal document. An officer laws (or partnership agreement), and would typically be	nt of a position listed in the article of incorporation, articles of r is a person who occupies a position specified in the corporate by e president, vice president for operations, vice president for finance filer is a sole proprietorship, the owner must sign the certification.		
Section 1: Initial Certification All ETCs must comple	te this section		
I certify that the company listed above has certification	procedures in place to:		
	mentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household or her enrollment in Lifeline; and/or		
B) Confirm consumer eligibility by relying upon acc Lifeline administrator prior to enrolling a consumer	ess to a state database and/or notice of eligibility from the state in the Lifeline program.		
I am an officer of the company named above. I am au above.	thorized to make this certification for the Study Area Code listed		
Initial JA			

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
23646	0	6933	2535	14178

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
14178	1209	12969	0	12969

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial

OR

T 040 T	
Initial	
umuan	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
14178	12969	91.47%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes **O**

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	458
February	396
March	1266
April	459
May	1098
June	426
July	314
August	272
September	381
October	979
November	650
December	211
Total Subscribers	6910

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

	Jeff Ansted President
Signed,	
Certified Online	
Signature of Officer	Printed Name and Title of Officer
jsa@ambt.net	01/27/2016
Email Address of Officer	Date
Jeff Ansted	419-824-5810
Person Completing This Certification Form	Contact Phone Number

329020

above.

Initial _JA

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

IN	American Broadband and Telecommunications (
State	ETC Name
American Assistance DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank) Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)	
termined in accordance with Section 3(2) of the Communications	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) where or control with, another person." 47 U.S.C. § 153(2). See also 47
ffiliated ETC's SAC	Affiliated ETC's Name
mation, or other similar legal document. An officer is vs (or partnership agreement), and would typically be	of a position listed in the article of incorporation, articles of s a person who occupies a position specified in the corporate bypresident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
ction 1: Initial Certification All ETCs must complete	this section
ertify that the company listed above has certification pr	ocedures in place to:
	entation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household her enrollment in Lifeline; and/or
Confirm consumer eligibility by relying upon access	s to a state database and/or notice of eligibility from the state

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
2557	0	247	491	1819

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
1819	399	1420	0	1420

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:			
	Results are provided in the chart above in		
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the		
	SAC listed above.		
	Initial ———		

OR

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
1819	1420	78.06%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes **O**

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	99
February	44
March	37
April	35
May	82
June	46
July	24
August	42
September	47
October	150
November	81
December	36
Total Subscribers	723

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online
Signature of Officer
jsa@ambt.net
Email Address of Officer

Jeff Ansted
Person Completing This Certification Form

Jeff Ansted President

Contact Phone Number

Printed Name and Title of Officer
01/27/2016
Date
419-824-5810

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

Prican Broadband and Telecommunications (Name	
EDIOANI DDOADDAND AND TELEOOMALII	
ERICAN BROADBAND AND TELECOMMUI	
Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)	
No o	
on defines "affiliate" as "a person that (directly or indirectly, trol with, another person." 47 U.S.C. § 153(2). See also 47	
TC's Name	
a	

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification *All ETCs must complete this section*

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial	JA

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
1526	0	102	102	1322

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
1322	136	1186	0	1186

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial

OR

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11111	ıaı	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
1322	1186	89.71%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 💿

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	26
February	11
March	13
April	6
May	21
June	20
July	18
August	60
September	72
October	135
November	101
December	107
Total Subscribers	590

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

	Jeff Ansted President
Signed,	
Certified Online	
Signature of Officer	Printed Name and Title of Officer
jsa@ambt.net	01/27/2016
Email Address of Officer	Date
Jeff Ansted	419-824-5810
Person Completing This Certification Form	Contact Phone Number

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

189030	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must pro	ovide a certification form for each SAC through which it provides Lifeline service).
MD	American Broadband and Telecommunications (
State	ETC Name
American Assistance	AMERICAN BROADBAND AND TELECOMMUI
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated E	TCs? Yes No 💿
Provide a list of all ETCs that are affiliated with the reporti	ing ETC, using page 4 and additional sheets if necessary. Affiliation shall be
owns or controls, is owned or controlled by, or is under con	nmon ownership or control with, another person." 47 U.S.C. § 153(2). See also 47
determined in accordance with Section 3(2) of the Commun owns or controls, is owned or controlled by, or is under con C.F.R. § 76.1200. Affiliated ETC's SAC	

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification *All ETCs must complete this section*

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial	JA

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
2193	0	96	144	1953

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
1953	215	1738	0	1738

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying of				
	Results are provided in the chart above in			
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the			
	SAC listed above.			
	Initial			

OR

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Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
1953	1738	88.99%

Section 4: **Pre-Paid ETCs**

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes O

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	27
February	18
March	8
April	4
May	8
June	11
July	9
August	6
September	8
October	82
November	41
December	5
Total Subscribers	227

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Jeff Ansted President Signed, Certified Online Signature of Officer jsa@ambt.net Email Address of Officer Date Jeff Ansted Person Completing This Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must	provide a certification form for each SAC through which it provides Lifeline service).
MI	American Broadband and Telecommunications (
State	ETC Name
	AMERICAN BROADBAND AND TELECOMMUI
American Assistance	AMERICAN BROADBAND AND TELECOMMO
American Assistance DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank) Does the reporting company have affiliated rovide a list of all ETCs that are affiliated with the reporter in accordance with Section 3(2) of the Comm	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)

formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate bylaws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification *All ETCs must complete this section*

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial	JA

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
216	0	214	2	0

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} - \mathbf{G})$	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
214	214	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.

Initial ———

OR

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I۲	111	ia		
		14		

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
214	0	0.0%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes O

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

	Jeff Ansted President
Signed,	
Certified Online	
Signature of Officer	Printed Name and Title of Officer
jsa@ambt.net	01/27/2016
Email Address of Officer	Date
Jeff Ansted	419-824-5810
Person Completing This Certification Form	Contact Phone Number

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provi	ide a certification form for each SAC through which it provides Lifeline service).
MI	American Broadband and Telecommunications (
State	ETC Name
American Assistance	AMERICAN BROADBAND AND TELECOMMUI
	-
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
oes the reporting company have affiliated ET covide a list of all ETCs that are affiliated with the reporting termined in accordance with Section 3(2) of the Communic	(If same as ETC name, list "N/A" Do not leave blank)
oes the reporting company have affiliated ET covide a list of all ETCs that are affiliated with the reporting termined in accordance with Section 3(2) of the Communications or controls, is owned or controlled by, or is under communications.	(If same as ETC name, list "N/A" Do not leave blank) Cs? Yes No g ETC, using page 4 and additional sheets if necessary. Affiliation shall be eations Act. That Section defines "affiliate" as "a person that (directly or indirectly)

formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate bylaws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification *All ETCs must complete this section*

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial	JA	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
71414	0	15973	15885	39556

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
22453	3923	18530	0	18530

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
17103	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	State of Michigan . Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial JA

OR

Initial	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
39556	18530	46.84%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes **O**

No 🔘

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	1486
February	707
March	1575
April	1067
May	1448
June	1646
July	774
August	867
September	1072
October	9495
November	5807
December	2982
Total Subscribers	28926

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

	Jeff Ansted President
Signed,	
Certified Online	
Signature of Officer	Printed Name and Title of Officer
jsa@ambt.net	01/27/2016
Email Address of Officer	Date
Jeff Ansted	419-824-5810
Person Completing This Certification Form	Contact Phone Number

369030

above.

Initial JA

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

MN	American Broadband and Telecommunications (
State	ETC Name
American Assistance	AMERICAN BROADBAND AND TELECOMMUI
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No O
	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
Affiliated ETC's SAC	Affiliated ETC's Name
For purposes of this filing, an officer is an occupant formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be p	Affiliated ETC's Name of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
For purposes of this filing, an officer is an occupant formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be p	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
For purposes of this filing, an officer is an occupant formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be p comptroller, treasurer, or a comparable position. If the file	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.

B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed

Lifeline administrator prior to enrolling a consumer in the Lifeline program.

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
163	0	42	15	106

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
106	18	88	0	88

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial ———

OR

T	1
Initia	
11111111	LII.

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
106	88	83.02%

Section 4: **Pre-Paid ETCs**

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes O

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	5
February	3
March	4
April	4
May	0
June	4
July	1
August	4
September	2
October	10
November	3
December	3
Total Subscribers	43

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Jeff Ansted President Signed, Certified Online Signature of Officer jsa@ambt.net 01/27/2016 Email Address of Officer Date Jeff Ansted 419-824-5810 Person Completing This Certification Form Contact Phone Number

Printed Name and Title of Officer

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

429033	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a	certification form for each SAC through which it provides Lifeline service).
MO	American Broadband and Telecommunications (
State	ETC Name
American Assistance	AMERICAN BROADBAND AND TELECOMMUI
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No O
determined in accordance with Section 3(2) of the Communication.	C, using page 4 and additional sheets if necessary. Affiliation shall be s Act. That Section defines "affiliate" as "a person that (directly or indirectly) wnership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
formation, or other similar legal document. An officer laws (or partnership agreement), and would typically be	t of a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate bypresident, vice president for operations, vice president for finance, iler is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	e this section
I certify that the company listed above has certification p	rocedures in place to:
	nentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household

B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed

income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or

Lifeline administrator prior to enrolling a consumer in the Lifeline program.

Initial ____

above.

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	B C D		D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
231	0	76	26	129

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
129	7	122	0	122

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.)	3.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:		
	Results are provided in the chart above in		
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the		
	SAC listed above.		
	Initial		

OR

T	1
Initia	
11111111	LII.

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
129	122	94.57%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 💿

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	7
February	2
March	2
April	5
May	49
June	26
July	8
August	26
September	17
October	38
November	44
December	18
Total Subscribers	242

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online

Signature of Officer
jsa@ambt.net

Email Address of Officer

Jeff Ansted

Person Completing This Certification Form

Jeff Ansted

Jeff Ansted President

Printed Name and Title of Officer

01/27/2016

Date

419-824-5810

Contact Phone Number

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

559023	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a	certification form for each SAC through which it provides Lifeline service).
NEVADA	AMERICAN BROADBAND AND TELECOMMUNICATIONS
State	ETC Name
AMERICAN ASSISTANCE	
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No No
determined in accordance with Section 3(2) of the Communications	C, using page 4 and additional sheets if necessary. Affiliation shall be s Act. That Section defines "affiliate" as "a person that (directly or indirectly) with with another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
formation, or other similar legal document. An officer laws (or partnership agreement), and would typically be	of a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate bypresident, vice president for operations, vice president for finance, iler is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	e this section
I certify that the company listed above has certification p	rocedures in place to:
	entation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household or her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon acceluifeline administrator prior to enrolling a consumer in	ss to a state database and/or notice of eligibility from the state in the Lifeline program.
I am an officer of the company named above. I am aut above.	horized to make this certification for the Study Area Code listed
Initial	

1

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January I of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
Ö	6	0	0	ō

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I.	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ó	0	0	0	0

K	L	
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC	
0	0	

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:			
	(List database or name of administrator here)	Results are provided in the chart above in		
	Blocks K through L. I am an officer of the company named SAC listed above.	above. I am authorized to make this certification for the		

Initial _____

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
0	6	0

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

	/	
Is the ETC Pre-Paid?	Yes 🔼	No 🗌

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	D
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	6

Signature Block

그러나 하는 그리고 있는 아이들 아이들이 그렇지만 그렇지만 하는 것이 되었다. 그리고 있는 것이 없는 그리고 있는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없었다.	ove is in compliance with all federal Lifeline certification bove. I am authorized to make this certification for the	
Signed,	JEFF ANSTED PRESIDENT	
Signature of Officer JSA & AMBT, NET	Printed Name and Title of Officer 1/28/16	
Email Address of Officer JEH ANSTED	Date 419 - 824 - 5810	
Person Completing This Certification Form		

309003

above.

Initial _JA

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

OH	American Broadband and Telecommunications (
State	ETC Name
American Assistance	AMERICAN BROADBAND AND TELECOMMUI
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
oes the reporting company have affiliated ETCs	s? Yes No 💿
etermined in accordance with Section 3(2) of the Communicati	ETC, using page 4 and additional sheets if necessary. Affiliation shall be ions Act. That Section defines "affiliate" as "a person that (directly or indirectly) n ownership or control with, another person." 47 U.S.C. § 153(2). See also 47
ffiliated ETC's SAC	Affiliated ETC's Name
ormation, or other similar legal document. An official was (or partnership agreement), and would typically	pant of a position listed in the article of incorporation, articles of the ser is a person who occupies a position specified in the corporate bybe president, vice president for operations, vice president for finance, the filer is a sole proprietorship, the owner must sign the certification.
ection 1: Initial Certification All ETCs must comp	plete this section
certify that the company listed above has certification	n procedures in place to:
	umentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household s or her enrollment in Lifeline; and/or
) Confirm consumer eligibility by relying upon ac Lifeline administrator prior to enrolling a consume	ccess to a state database and/or notice of eligibility from the state r in the Lifeline program.

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
867	0	862	5	0

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
862	862	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial

OR

Initiai	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
862	0	0.0%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes O

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

	Jeff Ansted President
Signed,	
Certified Online	
Signature of Officer	Printed Name and Title of Officer
jsa@ambt.net	01/27/2016
Email Address of Officer	Date
Jeff Ansted	419-824-5810
Person Completing This Certification Form	Contact Phone Number

309010

above.

Initial _JA

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

OH	American Broadband and Telecommunications (
State	ETC Name
American Assistance	AMERICAN BROADBAND AND TELECOMMUI
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
oes the reporting company have affiliated ETCs?	Yes No O
etermined in accordance with Section 3(2) of the Communication	CC, using page 4 and additional sheets if necessary. Affiliation shall be ns Act. That Section defines "affiliate" as "a person that (directly or indirectly) ownership or control with, another person." 47 U.S.C. § 153(2). See also 47
ffiliated ETC's SAC	Affiliated ETC's Name
ormation, or other similar legal document. An officency ws (or partnership agreement), and would typically be	nt of a position listed in the article of incorporation, articles of r is a person who occupies a position specified in the corporate by- e president, vice president for operations, vice president for finance, filer is a sole proprietorship, the owner must sign the certification.
ection 1: Initial Certification All ETCs must comple	ete this section
certify that the company listed above has certification	procedures in place to:
	mentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household or her enrollment in Lifeline; and/or

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
22407	0	3666	3976	14765

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
14765	2701	12064	0	12064

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:		
	Results are provided in the chart above in	
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the	
	SAC listed above.	
	Initial	

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

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Init	าดเ	
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Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
14765	12064	81.71%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 💿

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	1026
February	309
March	917
April	545
May	768
June	477
July	272
August	270
September	354
October	853
November	509
December	295
Total Subscribers	6595

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online

Signature of Officer

jsa@ambt.net

Email Address of Officer

Date

Jeff Ansted President

Printed Name and Title of Officer

01/27/2016

Date

Jeff Ansted

Person Completing This Certification Form

Date

Contact Phone Number

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

179030 Study Area Code (SAC)	
(An Eligible Telecommunications Carrier (ETC) must provide a	a certification form for each SAC through which it provides Lifeline service).
PENNSYLVANIA	AMERICAN BROADBAND AND TELECOMMUNICATIONS
State	ETC Name
AMERICAN ASSISTANCE	
	Holding Company Name
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	(If same as ETC name, list "N/A" Do not leave hlank)
determined in accordance with Section 3(2) of the Communicatio	Yes No No No Correction No
Affiliated ETC's SAC	Affiliated ETC's Name
formation, or other similar legal document. An office laws (or partnership agreement), and would typically b	nt of a position listed in the article of incorporation, articles of r is a person who occupies a position specified in the corporate by- e president, vice president for operations, vice president for finance, filer is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	ete this section
I certify that the company listed above has certification	procedures in place to:
A) Review income and program-based eligibility documents, to the best of my knowledge, the company income and/or program-based eligibility prior to his	mentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household or her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon acc Lifeline administrator prior to enrolling a consumer	cess to a state database and/or notice of eligibility from the state in the Lifeline program.
I am an officer of the company named above. I am a above.	uthorized to make this certification for the Study Area Code listed
InitialJA_	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
6	0	0	0	0

Recertification Results:

F	G	H = (F-G)	1	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
C	6	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
6	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA.

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

OR

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
0	0	O

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

					_/	_
Is	the	ETC	Pre-Paid?	Yes		No _

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	Ŏ
February	0
March	0
April	0
May	0
Tune	0
July	0
August	0
September	D
October	0
November	0
December	0
Γotal Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,	1	/	*J	
Signature	of Officer JSA	6	AMBT.	NET
Email Add	ress of Off	icer	ANSTEI	

JEFF	ANSTED	PRESIDENT
	e and Title of Of	ficer
	128/16	
Date 41	9-824-5	816
Contact Pho	ne Number	

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

639018			
Study Area Code (SAC)			
	a certification form for each SAC through which it provides Lifeline service).		
PVERTO RICO	AMERICAN BROAdbond And TELECOMMUNICATIONS		
State	ETC Name		
AMERICAN ASSISTANTE			
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)		
Does the reporting company have affiliated ETCs	? Yes No No		
determined in accordance with Section 3(2) of the Communicatio	TC, using page 4 and additional sheets if necessary. Affiliation shall be ns Act. That Section defines "affiliate" as "a person that (directly or indirectly) ownership or control with, another person." 47 U.S.C. § 153(2). See also 47		
Affiliated ETC's SAC	Affiliated ETC's Name		
formation, or other similar legal document. An office laws (or partnership agreement), and would typically be	nt of a position listed in the article of incorporation, articles of r is a person who occupies a position specified in the corporate by- e president, vice president for operations, vice president for finance, filer is a sole proprietorship, the owner must sign the certification.		
Section 1: Initial Certification All ETCs must complete	ete this section		
I certify that the company listed above has certification	procedures in place to:		
	mentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household or her enrollment in Lifeline; and/or		
B) Confirm consumer eligibility by relying upon acc Lifeline administrator prior to enrolling a consumer	ess to a state database and/or notice of eligibility from the state in the Lifeline program.		
I am an officer of the company named above. I am at above.	uthorized to make this certification for the Study Area Code listed		
Initial JA			

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
0	Ó	0	0	0

Recertification Results:

F	G	H = (F-G)	1	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ó	Ô	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	/>

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

AN

AND/OR

	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:									
	(List database or name of administrator here)		Results	are	provided	in	the	chart	above	in
	Blocks K through L. I am an officer of the company named above.	I	am auth	orize	ed to make	thi	s cer	tificat	ion for	the
	SAC listed above.									
	Initial									

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial ____

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
0	٥	0

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

		(9)
Is the ETC Pre-Paid?	Yes 🗸	No _

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	D
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	6

Signature Block

	ove is in compliance with all federal Lifeline certification
Study Area Code (SAC) listed above.	above. I am authorized to make this certification for the
19 (200 € 19 10 19 10 19 (200 19 19 19 19 19 19 19 19 19 19 19 19 19	
Signed,	JEFF ANSTED PRESIDENT
Signature of Officer TSA 6 AMST. NET	Printed Name and Title of Officer
Email Address of Officer JEFF ANSTED	Date 419 - 824 - 5810
Person Completing This Certification Form	Contact Phone Number

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

589016	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a contract of the communications of the communicati	certification form for each SAC through which it provides Lifeline service).
RHODE ISLAND	AMERICAN BROADBAND AND TELECOMMUNICATIONS
State	ETC Name
AMERICAN ASSISTANCE	
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No 🗹
determined in accordance with Section 3(2) of the Communications	, using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) whership or control with, another person," 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be	of a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate by-president, vice president for operations, vice president for finance, ler is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	this section
I certify that the company listed above has certification pro	rocedures in place to:
	entation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household r her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in	ss to a state database and/or notice of eligibility from the state the Lifeline program.
I am an officer of the company named above. I am autlabove.	norized to make this certification for the Study Area Code listed
Initial	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
0	()	0	0	0

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	6	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	6

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:										
	(List database or name of administrator here)		Results	are	provided	in	the	chart	above	in	
	Blocks K through L. I am an officer of the company named above.	1	am auth	orize	ed to make	thi	s cer	tificat	ion for	the	
	SAC listed above.										
	Initial										

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
0	0	0

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

	/	
Is the ETC Pre-Paid?	Yes 📝	No 🔲

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q	
Month	Subscribers De-Enrolled for Non-Usage	
January	0	
February	0	
March	0	
April	0	
May	0	
June	0	
July	0	
August	O	
September	0	
October	0	
November	D	
December	0	
Total Subscribers	0	

Signature Block

	pove is in compliance with all federal Lifeline certification above. I am authorized to make this certification for the
Signed,	JEFF ANSTED , PRESIDENT
Signature of Officer	Printed Name and Title of Officer
JSAG AMBT. NET	1/28/16
Email Address of Officer	Date
JEFF ANSTED	419- 824-5810
Person Completing This Certification Form	Contact Phone Number

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

249029	
Study Area Code (SAC)	
(An Eligible Telecommunications Carrier (ETC) must provide	e a certification form for each SAC through which it provides Lifeline service).
South CAROLINA	AMERICAN BROAdbArd And TELECOMMUNICATIONS
State	ETC Name
AMERICAN ASSISTANCE	
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
determined in accordance with Section 3(2) of the Communicate	S? Yes No DETC, using page 4 and additional sheets if necessary. Affiliation shall be ions Act. That Section defines "affiliate" as "a person that (directly or indirectly) in ownership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
formation, or other similar legal document. An offic laws (or partnership agreement), and would typically comptroller, treasurer, or a comparable position. If the	ant of a position listed in the article of incorporation, articles of the series a person who occupies a position specified in the corporate bybe president, vice president for operations, vice president for finance, the filer is a sole proprietorship, the owner must sign the certification.
I certify that the company listed above has certification	n procedures in place to:
 A) Review income and program-based eligibility doct that, to the best of my knowledge, the company income and/or program-based eligibility prior to hi 	umentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household is or her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon a Lifeline administrator prior to enrolling a consume	ccess to a state database and/or notice of eligibility from the state or in the Lifeline program.
I am an officer of the company named above. I am above.	authorized to make this certification for the Study Area Code listed
InitialJA	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
0	0	0	0	O

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	O

K	L	
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC	
0	0	

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

Initial _

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
0	0	6

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

	/	
Is the ETC Pre-Paid?	Yes 🗹	No 🔲

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q	
Month	Subscribers De-Enrolled for Non-Usage	
January	0	
February	0	
March	0	
April	Ö	
May	0	
June	0	
July	0	
August	0	
September	0	
October	0	
November	0	
December	0	
Total Subscribers	0	

Signature Block

By signing below, I certify that the company listed ab procedures. I am an officer of the company named	ove is in compliance with all federal Lifeline certification above. I am authorized to make this certification for the	
Study Area Code (SAC) listed above.		
Signed,		
$\Lambda \Pi = \mathcal{L} = \mathcal{U}$	JEFF ANSTED PRESIDENT	
Signature of Officer	Printed Name and Title of Officer	
JSAG AMBT. NET	1/28/16	
Email Address of Officer	Date	
JERF ANSTED	ANSTED 419-824-5810	
Person Completing This Certification Form	Contact Phone Number	

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

Study Area Code (SAC)	
	ertification form for each SAC through which it provides Lifeline service).
VTAH	AMERICAN BROADBAND And TELECOMMUNICATIONS
State	ETC Name
AMERICAN ASSISTANCE	
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
determined in accordance with Section 3(2) of the Communications	Yes No version No vers
Affiliated ETC's SAC	Affiliated ETC's Name
formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be p	of a position listed in the article of incorporation, articles of s a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, ler is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	this section
I certify that the company listed above has certification pr	rocedures in place to:
A) Review income and program-based eligibility docume that, to the best of my knowledge, the company wa income and/or program-based eligibility prior to his or	ntation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in	ss to a state database and/or notice of eligibility from the state the Lifeline program.
I am an officer of the company named above. I am authabove.	norized to make this certification for the Study Area Code listed
Initial <u>JA</u>	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
0	0	0	0	0

Recertification Results:

F	G	H = (F-G)	1	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
(List database or name of administrator here)
Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.
Initial

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
0	0	0

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?	Yes 🗸	No 🗆	

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	D
July	0
August	0
September	0
October	ð
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.		
Signed, Signature of Officer JSA & AMBT, NET	JEFF AWSTED, PRESIDENT Printed Name and Title of Officer 1) 28/16	
Email Address of Officer JEFF ANSTED	Date 419-824 -5810	
Person Completing This Certification Form	Contact Phone Number	

339038

above.

Initial JA

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

WI	American Broadband and Telecommunications (
State	ETC Name	
American Assistance	AMERICAN BROADBAND AND TELECOMMUI	
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)	
ooes the reporting company have affiliated ETCs?	Yes No O	
etermined in accordance with Section 3(2) of the Communications	C, using page 4 and additional sheets if necessary. Affiliation shall be s Act. That Section defines "affiliate" as "a person that (directly or indirectly) wnership or control with, another person." 47 U.S.C. § 153(2). See also 47	
ffiliated ETC's SAC	Affiliated ETC's Name	
ormation, or other similar legal document. An officer two (or partnership agreement), and would typically be	t of a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate by-president, vice president for operations, vice president for finance, ller is a sole proprietorship, the owner must sign the certification.	
ection 1: Initial Certification All ETCs must complete	e this section	
certify that the company listed above has certification p	rocedures in place to:	
Review income and program-based eligibility docum	entation prior to enrolling a consumer in the Lifeline program, and	
	vas presented with documentation of each consumer's household	

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed

Lifeline administrator prior to enrolling a consumer in the Lifeline program.

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
698	0	69	124	505

Recertification Results:

F	G	$\mathbf{H} = (\mathbf{F} - \mathbf{G})$	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
505	87	418	0	418

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.)) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:		
	Results are provided in the chart above in		
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the		
	SAC listed above.		
	Initial		

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
505	418	82.77%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 💿

No 🔘

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	30
February	13
March	13
April	15
May	18
June	12
July	11
August	13
September	48
October	74
November	38
December	3
Total Subscribers	288

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

	Jeff Ansted President
Signed,	
Certified Online	
Signature of Officer	Printed Name and Title of Officer
jsa@ambt.net	01/27/2016
Email Address of Officer	Date
Jeff Ansted	419-824-5810
Person Completing This Certification Form	Contact Phone Number

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

Study Area Code (SAC)	
•	de a certification form for each SAC through which it provides Lifeline service).
WV	American Broadband and Telecommunications (
State	ETC Name
American Assistance	AMERICAN BROADBAND AND TELECOMMUI
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETC Provide a list of all ETCs that are affiliated with the reporting determined in accordance with Section 3(2) of the Communication	(If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETC Provide a list of all ETCs that are affiliated with the reporting determined in accordance with Section 3(2) of the Communications or controls, is owned or controlled by, or is under communications.	(If same as ETC name, list "N/A" Do not leave blank) Cs? Yes No ETC, using page 4 and additional sheets if necessary. Affiliation shall be utions Act. That Section defines "affiliate" as "a person that (directly or indirectly)
Does the reporting company have affiliated ETC Provide a list of all ETCs that are affiliated with the reporting letermined in accordance with Section 3(2) of the Communications or controls, is owned or controlled by, or is under communications. § 76.1200.	(If same as ETC name, list "N/A" Do not leave blank) Cs? Yes No ETC, using page 4 and additional sheets if necessary. Affiliation shall be ations Act. That Section defines "affiliate" as "a person that (directly or indirectly) non ownership or control with, another person." 47 U.S.C. § 153(2). See also 47

Section 1: Initial Certification *All ETCs must complete this section*

I certify that the company listed above has certification procedures in place to:

A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or

comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial	JA

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
161	0	7	44	110

Recertification Results:

	F	G	$\mathbf{H} = (\mathbf{F} \cdot \mathbf{G})$	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
	Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
ĺ	110	37	73	0	73

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JA

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial ———

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

T	1
Initia	
11111111	LII.

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
110	73	66.36%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 💿

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	13
February	7
March	9
April	5
May	6
June	3
July	6
August	2
September	0
October	7
November	3
December	0
Total Subscribers	61

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

	Jeff Ansted President
Signed,	
Certified Online	
Signature of Officer	Printed Name and Title of Officer
jsa@ambt.net	01/27/2016
Email Address of Officer	Date
Jeff Ansted	419-824-5810
Person Completing This Certification Form	Contact Phone Number